

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail****Mail Stop ISSUE FEE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
(703) 746-4000**or **Fax**

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address, and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

30743

7590

04/16/2004

WHITHAM, CURTIS & CHRISTOFFERSON, P.C.  
11491 SUNSET HILLS ROAD  
SUITE 340  
RESTON, VA 20190

Customer Number: 30743

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

|                       |                    |
|-----------------------|--------------------|
| <b>Hand Delivered</b> | (Depositor's name) |
|                       | (Signature)        |
|                       | (Date)             |

| APPLICATION NO. | FILING DATE | INVENTOR          | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|-------------------|---------------------|------------------|
| 09/825,889      | 04/05/2001  | Masahide Wakisaka | N36-131337M/TH      | 3750             |

TITLE OF INVENTION: OPTICAL WRITE HEAD, AND METHOD OF ASSEMBLING THE SAME

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1330    | \$300           | \$1630           | 07/16/2004 |

| EXAMINER      | ART UNIT | CLASS-SUBCLASS |
|---------------|----------|----------------|
| PHAM, HAI CHI | 2861     | 347-238000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Whitham, Curtis &  
1. Christofferson, P.C.  
2.  
3.

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Nippon Sheet Glass Co., Ltd.

Osaka, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

## 4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee  
☒ Advance Order - # of Copies 10

## 4b. Payment of Fee(s):

- ☒ A check in the amount of the fee(s) is enclosed.  
☐ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2041 (enclose an extra copy of this form). **Deficiencies**

Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Authorized Signature) Michael E. Whitham (Date) 7-2-04  
Reg. No. 32,635

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.**

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

07/08/2004 MMEKONE1 00000005 09825889

01 FC:1501  
02 FC:1504  
03 FC:8001

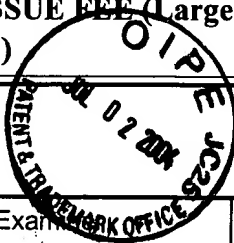
1330.00 OP  
300.00 OP  
30.00 OP

TRANSMIT THIS FORM WITH FEE(S)

**TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)**  
(37 C.F.R. 1.311)

Docket No.  
02410235AA

Applicant(s): M. Wakisaka, et al.



|                               |                              |                                 |                       |                        |                          |
|-------------------------------|------------------------------|---------------------------------|-----------------------|------------------------|--------------------------|
| Application No.<br>09/825,889 | Filing Date<br>April 5, 2001 | Examining Officer<br>H. C. Pham | Customer No.<br>30743 | Group Art Unit<br>2861 | Confirmation No.<br>3750 |
|-------------------------------|------------------------------|---------------------------------|-----------------------|------------------------|--------------------------|

Invention: OPTICAL WRITE HEAD, AND METHOD OF ASSEMBLING THE SAME

**Mail Stop Issue Fee**  
**COMMISSIONER FOR PATENTS**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 1360.00    ☐ Design Fee: \_\_\_\_\_    ☐ Plant Fee: \_\_\_\_\_
- ☒ Publication Fee: \$ 300.00
- ☒ A check in the amount of \$1,660.00 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 50-2041 as described below.
- ☐ Charge the amount of \_\_\_\_\_
- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.

Dated: July 2, 2004

Michael E. Whitham  
Reg no. 32,635  
Whitham, Curtis & Christofferson, P.C.  
11491 Sunset Hills Road, Suite 340  
Reston, Virginia 20190  
703-787-9400

CC:

**Certificate of Transmission by Facsimile**  
This certificate may only be used if paying  
by deposit account.

I certify that this document and authorization to charge deposit account is being facsimile transmitted to the United States and Trademark Office (Fax ) on

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Typed or Printed Name of Person Signing Certificate

**Certificate of Mailing by First Class Mail**

I certify that this document and fee is being deposited with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

\_\_\_\_\_  
Signature of Person Mailing Correspondence

**HAND DELIVERED**

\_\_\_\_\_  
Typed or Printed Name of Person Mailing Correspondence